Hawai`i Teacher Standards Board 650 Iwilei Road, Suite 201 Honolulu, HI 96817 Attention: Licensing Section



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EXPERIENCE VERIFICATION FORM CAREER AND TECHNICAL EDUCATION VOCATIONAL LICENSE FIELDS

Copy this form and submit one form for each place of employment.

SECTION 1. PERSONAL IN	FORMATION Type or print in bl	ue ink.
Social Security Number	L LETTERS.	Date of Birth/ MM DD YY
(LAST NAME)	(FIRST NAME)	(MIDDLE NAME)
SECTION 2. TRADE EXPER	RIENCE	

Trade Experience Requirements:

- (1) Paid/unpaid experiences must have been completed within ten years of the date of your application for the Hawai'i vocational license; and
- (2) Experiences must be with businesses registered with the appropriate state, county or city registration agency; and
- (3) Documentation for authorized field must be submitted on this form, signed by authorized individual(s) with phone number, address and/or e-mail address of the business, and beginning and ending dates clearly noted.

Have authorizing individual(s) send the documentation to you directly. Total the hours and if you meet the requirements, you may request the additional vocational teaching field. Submit all documentation with your application and include a summary total of the hours verified.

NOTE: This vocational field option is available only to individuals who already hold the teaching license in the standard field.

Check the experience(s) you are submitting. Refer to page 3 for a list of occupations usually included in each category.		
☐ CTE Industrial and Engineering Technology-Vocational: Minimum of two (2) years (3600 hours) of experience.		
CTE Business-Vocational: One (1) year (1800 hours) of work experience.		
☐ CTE Arts and Communication-Vocational: One (1) year (1800 hours) of work experience.		
☐ CTE Natural Resources-Vocational: At least two (2) years (3600 hours) of practical experience.		
☐ CTE Public and Human Services- Vocational: One (1) year (1800 hours) of work experience.		
☐ CTE Health Services- Vocational: One (1) year (1800 hours) of work experience.		
SECTION 3. VERIFICATION BY EMPLOYER All fields must be answered.		
I hereby verify the trade experience of the following individual:		
Employee Name		
Employed fromto		
Position:		
Employer SignatureDate		
Employer SignatureDate		
Employer Printed NamePosition		
Employer Printed NamePosition Business License/Registration Number		

Arts and Communication

- Animation
- Broadcast Media
- Digital Media
- Fashion Design
- Game Design
- Graphic Design
- Web Design

Business

- Accounting
- Business Law
- Entrepreneurship
- Finance
- Human Resources Management
- Management
- Management Information Systems
- Marketing
- Office Administration
- Oracle
- Retail Marketing and Merchandising
- Travel Management

Health Services

- Clinical Health
- Emergency Medical Services
- Health Information
- Medical Biotechnology
- Nurse's Aide
- Nutrition

Public and Human Services

- Culinary
- Early Childhood Education
- Elementary Education
- Hospitality Services

Natural Resources

- Agriculture
- Environmental and Conservation
- Environmental Resource Management
- Fisheries
- Forestry
- Natural Resources Biotechnology
- Natural Resources Production
- Plant Design and Management

Industrial and Engineering Technology

- A+
- Autobody Repair and Refurbishing
- Automotive Technology
- Building and Construction
- CISCO
- Computer Networking
- Cybersecurity
- Computer Technician
- Design Technology
- Electrical Installation
- Electronics and Electrical Engineering
- Engineering Technology
- Metal Working